

## **2005 Medical Care Savings Account**

## Penalty Calculation For Self-Administered Individual Accounts 15-61-201, MCA

Taxpay	/er	Inform	ation
IUADU			auvii

Yo	Your name	Social Security Number
Αd	Account Information	
Yo	Your medical care savings account numbe	r
Fir	Financial institution where your account is	held
Ad	Address of your financial institution	
	<u></u>	
Fo ac If y	Form 2 (long form). All non-qualifying with account (MSA) have to be included as inconstituted in the self-admin medical expenses, including withdrawals the self-admin medical expenses.	istered MSA that were not used to pay for your qualifying nat you made on the last business day of the tax year, you
	will have to complete the worksheet below. last business day of the tax year, are subje	<ul> <li>Non-qualifying withdrawals, other than those made on the ect to a 10% penalty.</li> </ul>
1.	Enter the total from column D of your Mohas to be reported on Form 2A, Schedule	ntana Form MSA. This amount also e I, line 8 11
2.		column D of your Form MSA that were made 2005 2
3.	3. Subtract the amount on line 2 from the	amount on line 1 and enter the result 3.
4.	4. Multiply the amount on line 3 by .10 (10%	6). <b>This is your penalty.</b> Enter this